

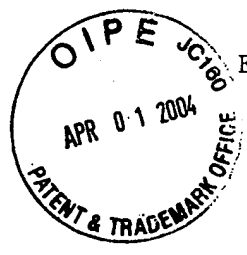
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Monica L. Thomas	(Depositor's name)
<i>Monica L. Thomas</i>	(Signature)
April 1, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/735,161	12/12/2000	Randy B. Thomas	P01944US1	4680

TITLE OF INVENTION: ASPHALT EMULSION PRODUCING AND SPRAYING PROCESS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	04/21/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
TOOMER, CEPHIA D	1714	044-301000			

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(A) NAME OF ASSIGNEE Kentucky Energy, L.L.C. Ikerd Coal Company, L.L.C.	(B) RESIDENCE: (CITY and STATE OR COUNTRY) Somerset, Kentucky Somerset, Kentucky
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Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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Melissa L. Sistrunk
(Authorized Signature)

April 1, 2004
(Date)

Melissa L. Sistrunk (455,579)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/735,161
	Filing Date	December 12, 2000
	First Named Inventor	Randy B. Thomas
	Art Unit	1714
	Examiner Name	C. D. Toomer
Total Number of Pages in This Submission	Attorney Docket Number	HO-P01944US1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form – (Part B) <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	FULBRIGHT & JAWORSKI L.L.P. Melissa L. Sistrunk
Signature	
Date	April 1, 2004

Transmittal	
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Dated: April 1, 2004	Signature: (Monica L. Thomas)